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Dear Mr

For your information and files I am enclosing a case report which might be of interest.

Yours sincerely,

Harold A. Abramson, M. D.

HAA/nb

CASE REPORT ON PATIENT JOHN Q. SMITH

I was called in consultation to see Mr. John Q. Smith bout ten days after Mr. Smith had received 70 micrograms by outh in a highly protected situation. Mr. Smith, although gitated and concerned over his relationships in work situations, elated very well to his friends, to me, and to community problems n general. It appeared that Mr. Smith had profound guilt feelngs because he had been retired as an officer during the last ar and was drawing a pension. His intense feelings of guilt esulted from receiving government money to which he felt that he as not entitled. These feelings were not eliminated by his ealistic understanding that he had appeared before a retirement oard. A strong feeling of inadequacy dominated his present work. e felt that he was not doing as good a job as he thought he hould even though he was thought well of by his colleagues and romotions had come readily. In several hours of interviewing or a period of two days his agitation could not be directly inked with a psychotic state until he said that his sleeplessess had been caused by the FBI who had surreptitiously been lacing amphetamine or caffeine in his food at night to keep im awake. These feelings of having drugs being placed in his ood had been present for at least five months before he had eceived his therapeutic dose of 70 micrograms. He also disclosed that he had shown bizarre behavior for nine months before o that his wife thought he needed medical attention. This led o an outpouring of an intense desire on his part to be punished y the authorities for his past conduct of taking money fraudlently from the government following his retirement by an Army oard.

Subsequent discussion with the patient and an accomanying friend led to his agreeing to entering a mental institution. Different hospitals were discussed. He chose one near is home and appeared to be relieved that some decision had een made to take care of his problems. Accompanied by his riend who shared the same room with him he went to a hotel for he night because the hospital chosen was distant and he could ot be accepted at once. In the middle of the night without ny warning he plunged head-first through a heavy glass window hattering it and fell to his death on the pavement below.

Information subsequently received revealed that he ad discussed suicide frequently during the previous year and o the best of my information had been talked out of suicide wice. In my opinion Mr. Smith had been suffering for some ime with a paranoid type of depressive psychosis which, lthough reluctantly recognized by his family and friends, had ot received adequate medical care. It is my opinion, also, n view of my experience with various ambulatory types of ubjects, that this dosage could hardly have had any signifi